13

EXPRESS MAIL NO.: EL 501 636 145 US

DECLARATION FOR NON-PROVISIONAL PATENT APPLICATION*

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below at 201 et seq. beneath my name.

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled

RECOMBINANT ANTI-CD30 ANTIBODIES AND USES THEREOF

and for which a patent application:

is attached hereto and includes amendment(s) filed on (if applicable)

was filed in the United States on as Application No. (for declaration not accompanying application) with amendment(s) filed on (if applicable)

□ was filed as PCT international Application No. on and was amended under PCT Article 19 on ((fapplicable)

I hereby state that I have reviewed and understand the contents of the above identified application, including the claims, as amended by any

I acknowledge the duty to disclose information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations,

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any forcign application for patent or inventor's certificate having a filing date before that

EARLIEST FOREIGN APPLIC	ATION(S), IF ANY, FILED PRIOR	TO THE FILING DATE (OF THE APPLICATION
APPLICATION NUMBER	COUNTRY	DATE OF FILING (day, month, year)	PRIORITY CLAIMED
		ļ	YES D NO D
			YES D NO D
hereby claim the benefit under Title 35, Unit	ed States Codo \$110(2) C		YES D NO D

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.

	cy of any officed States provisional application(s) listed below.		
PROVISIONAL APPLICATION NUMBER	FILING DATE		
I hereby alains at the			

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information known to me which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the

	••		•	-PP-reation and the
NON-PROVISIONAL APPLICATION SERIAL NO.	FILING DATE		STATUS	
		PATENTED	PENDING	ABANDONED

^{*} for use only when the application is assigned to a company, partnership or other organization.

(1) NY2 - 1143163.1

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

		LAST NAME			
2	FULL NAME OF INVENTOR	Francisco	FIRST NAME Joseph	MIDDLE NAME A.	
0	RESIDENCE & CITIZENSHIP	CITY Edmonds	STATE OR FOREIGN COUNTRY Washington	COUNTRY OF CITIZENSHIP USA	
	POST OFFICE ADDRESS	STREET 21705 92nd Avenue West	спу Edmonds	STATE OR COUNTRY Washington	ZIP CODE 98020
		SIGNATURE OF INVENTOR 201	_	DATE	98020
	FULL NAME OF INVENTOR	LAST NAME Risdon	FIRST NAME Grant	MIDDLE NAME	
2 0 2	RESIDENCE & CITIZENSHIP	CITY Clayton	STATE OR FOREIGN COUNTRY Missouri	COUNTRY OF CITIZENSHIP USA	
	POST OFFICE ADDRESS	STREET 7400 Northmoor	CITY Clayton	STATE OR COUNTRY Missouri	ZIP CODE 63105
		SIGNATURE OF INVENTOR 202		DATE	
2 0 3	FULL NAME OF INVENTOR	LAST NAME Wahl	FIRST NAME Alan	MIDDLE NAME F.	
	RESIDENCE & CITIZENSHIP	CITY Mercer Island	STATE OR FOREIGN COUNTRY Washington USA		ZENSHIP
	POST OFFICE ADDRESS	STREET 6150 East Mercer Way	CITY Mercer Island	STATE OR COUNTRY Washington	ZIP CODE 98040
		SIGNATURE OF INVENTOR 203		DATE	
2 0 4	FULL NAME OF INVENTOR	LAST NAME Siegall	FIRST NAME Clay	MIDDLE NAME COUNTRY OF CITIZENSHIP USA	
	RESIDENCE & CITIZENSHIP	CITY Edmonds	STATE OR FOREIGN COUNTRY Washington		
	POST OFFICE ADDRESS	STREET 639 8th Avenue South	CITY Edmonds	STATE OR COUNTRY Washington	ZIP CODE 98020
		SIGNATURE OF INVENTOR 204		DATE	